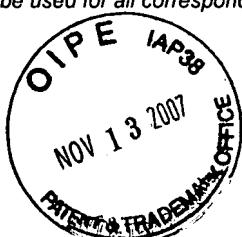


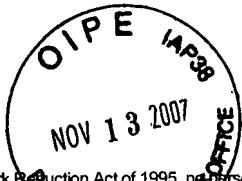
TRANSMITTAL FORM		Application Number 10/622,776
<i>(to be used for all correspondence after initial filing)</i>		Filing Date 07/21/2003
		First Named Inventor HAGANO et al.
		Group Art Unit 1751
		Examiner Name Vijayakumar, Kallambella M
		ATTN: Paul Shanoski, Office of Petitions
		Attorney Docket Number 26D-010-RCE



ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input checked="" type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
		Copy of decision on petition pursuant to 37 C.F.R. § 1.181(a) mailed on October 26, 2007
		Second request for renewed petition under 37 C.F.R. § 1.181 (a) with Exhibits A-G
		CONTINGENT petition for revival of an application for patent abandoned unintentionally under 37 C.F.R. 1.137(b)
		Issue fee transmittal
		Executed Form PTOL-85B (original and 1 copy)
		Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Posz Law Group, PLC DAVID G. POSZ (Reg. No. 37,701)
Signature	
Date	November 13, 2007



Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2008

Applicant Claims small entity status. See 37 CFR 1.27

Complete if Known	
Application Number	10/622,776
Filing Date	July 21, 2003
First Named Inventor	HAGANO et al.
Examiner Name	Vijayakumar, Kallambella M ATTN: PAUL SHANOSKI, Office of Petitions
Art Unit	1751
TOTAL AMOUNT OF PAYMENT	(\$) 1740
Attorney Docket No.	26D-010-RCE

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-1147 Deposit Account Name: Posz Law Group, PLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)
Utility	310	155	510	255	210	105	\$
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Small Entity
- 20 or HP =	0	x \$50	= \$0		
HP = highest number of total claims paid for, if greater than 20					
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		
- 3 or HP =	0	x \$210	= \$0		
HP = highest number of independent claims paid for, if greater than 3					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	0	/ 50 = (round up to a whole number)	x _____	= \$0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Issue and Publication Fee

\$1740

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	37,701	Telephone	(703) 707-9110
Name (Print/Type)	DAVID G. POSZ			Date	November 13, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.